

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-375)**

SERIAL NO. 10-036,363 FILING
APPLICANT(S)

		CLAIMS							
		AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
		IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1		1						51	
2			1					52	
3			2					53	
4			2					54	
5			1					55	
6			1					56	
7			1					57	
8			1					58	
9			1					59	
10			1					60	
11		1						61	
12		1						62	
13		1						63	
14			1					64	
15			1					65	
16								66	
17								67	
18								68	
19								69	
20								70	
21								71	
22								72	
23								73	
24								74	
25								75	
26								76	
27								77	
28								78	
29								79	
30								80	
31								81	
32								82	
33								83	
34								84	
35								85	
36								86	
37								87	
38								88	
39								89	
40								90	
41								91	
42								92	
43								93	
44								94	
45								95	
46								96	
47								97	
48								98	
49								99	
50								100	
TOTAL IND.	4							TOTAL IND.	
TOTAL DEP.	13							TOTAL DEP.	
TOTAL CLAIMS	17							TOTAL CLAIMS	

PTO-375 (2-78)

THIS IS USED FOR ADDITIONAL CLAIMS ON AMENDMENTS